SYSTEMWIDE MANAGEMENT

MEMBERSHIP CERTIFICATION

MEMBER CERTIFICATION FORM

FY 2013 Membership Certification

Please complete the form below and submit by 7/23/2012

Your form has been Saved. Return to the Tool Homepage to access your forms.

Status: In Progress Communications Contact

All communications for this form and any questions PBS may have will be made with the following individual. Identify the individual who should receive all communications:

First and Last Name*	Jack Neal
E-Mail Address*	jkneal@eiu.edu
Station Information	
Please enter your Station information:	
Station Call Letters (or State Network)*	WEIU
Licensee Organization (per FCC License)*	Eastern Illinois University
if other, Operating Organization	
Organization Street Address*	600 Lincoln Avenue
Organization City*	Charleston
Organization State and Zip Code*	Illinois 61920

The above named licensee organization, a member of the Public Broadcasting Service("PBS"), certifies that the public television broadcast station(s) operated by the organization (i) provide(s) nonsectarian, nonpolitical, noncommercial educational program service to the general public in the community served by the station(s), in accordance with PBS policies, and (ii) complies at all times with comply terms, conditions and guidelines set forth in the PBS Member Station Handbook and all other applicable PBS policies (available on PBS Connect at http://connect.pbs.org under Systemwide Management > PBS Member Toolkit > PBS Member Station Handbook), including without limitations all financial obligations.

The licensee organization understands that this certification is a condition of its membership in PBS.

	Signature*	Jack K. Neal
	Title*	General Manager
	Date*	7/12/2012
BSM	ember Station Information	
GM C	ontact Information	
	Primary PBS Contact Information (GM)*	Jack K. Neal
	Email Address*	jkneal@eiu.edu
	Phone Number*	217-581-7196

II. Station Information

Please list your transmitter information here:

ERP 255 KW Frequency: 686-692MHz, RF Channel 50 Primary Channel 51-1

e.

Please detail below any changes to your transmitter or operation that may have impacted your digital population coverage. (For example, change in the number of transmitters, location, power, etc...):

None		200
		88
tal Services		
A. Broadcast Multicast Channels		
	and general description of each of your station's cription of nationally packaged channels like PB	
Channel #		
Channel #1	51.1 PBS PDP Schedule	Remo
Channel #2	51.2 MHz	Remo
Channel #3	51.6 Local Digital Feed	Remo
Add Row		
Identify your Primary PBS Chann	nel:	
Primary PBS Channel	51.1 PBS PDP Schedule	
B. Cable/Satelite/FiOS/Mobile/Othe	r	
	ervices your station is providing via Cable, Sate or example, an educational channel on Cable)	lite, FiOS, Mobile, t
Your 13 cable channel for	r Consolidated Cable	



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FY 2013 PDP Renewal Application

Member Station: WEIU
1. FY 2013 NPS Participation Level: 25 %
2. NPS Delay
X Long-Delay Option (8-day delay for most NPS primetime programming)
Short-Delay Option (12-hour delay for most NPS primetime programming; stations must pay a 50% NPS dues premium for this option)
3. PBS Fundraising Programming (PFP)
_X Option 1: My station will delay, by one national pledge drive, its first broadcast of pledge programming designated for the current national drive (March June, August/September, December), with no impact on its dues payment.
Option 2: My station will pay a 25% surcharge on its PFP dues in order to broadcast pledge programming without delay.
Option 3: My station elects not to participate in PFP in FY 2013.
Thanks and please let me know if you have any questions.
Thomas

Thomas

Thomas W. Crockett Vice President, Member Affairs Public Broadcasting Service 2100 Crystal Drive Arlington, VA 22202 703-739-5434 (p); 703-739-8444 (f)